

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>W M</i>	<i>32</i>	<i>6/12</i>
FORMALITY REVIEW	<i>W M</i>	<i>869</i>	<i>63-05-01</i>
RESPONSE FORMALITY REVIEW	<i>N N</i>	<i>778</i>	<i>7/17/07</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1		12/10/01	
2		5/18/02	
3		5/17/03	
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Claim	Final	Original	Date
51		5/20/02	
52		5/18/03	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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